



**Headquarters**  
5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**  
2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**  
815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**  
303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

## **Testimony to the Connecticut General Assembly Labor and Public Employees Committee In Support of SB-1178**

Submitted by Jared Make, Vice President, A Better Balance  
March 8, 2023

Thank you for the opportunity to submit written comments on SB-1178, a critically important bill that will modernize Connecticut's paid sick time law, provide needed support to workers across the State, minimize the costly and disruptive spread of illness in the workplace, and greatly improve public health.

A Better Balance is a national legal advocacy organization with four regional offices dedicated to promoting fairness in the workplace and helping workers meet the conflicting demands of work and family. Our organization provides legal and policy support to paid sick time campaigns throughout the nation, and we have worked on nearly all of the paid leave laws that are now or will soon be in effect. In addition to our legal research and drafting of paid sick leave laws, we have significant experience with paid leave implementation and enforcement.

The first section of this comment includes a summary regarding the need for SB-1178. The second section of this comment highlights several core components of SB-1178, as opposed to some concerning limitations that would be maintained in HB-6668's alternative paid sick leave proposal. Finally, the third section provides more in-depth research regarding the ways in which paid sick leave laws benefit workers, employers, and public health.

### **I. Summary and Overview of the Need for SB-1178**

More than a decade ago, the Connecticut Legislature became the first state in the country to pass a statewide paid sick leave law, a milestone that paved the way for an incredible rise in paid sick time laws around the U.S. A decade later, 14 states and D.C. now guarantee paid sick time, three additional states guarantee general paid time off that can be used for any purpose, and nearly two dozen local governments have passed paid sick time laws.

**While Connecticut's law was a landmark achievement when passed in 2011, it is now an extreme outlier compared to other paid sick leave laws and leaves far too many workers behind. Based on growing research showing that comprehensive paid sick time laws work well for workers, employers, and the larger community, the State should take immediate steps to bring Connecticut's paid sick leave law into line with other laws around the U.S., covering all workers who lack this important protection. SB-1178 is the bill needed to fill these gaps.** While HB-6668 would modernize *certain* elements of the State's current paid sick leave law, that alternative proposal maintains a number of concerning gaps that would undermine the law's purposes.

Nationwide, nearly 30 million workers have no paid sick leave, and low-wage workers, workers with high public contact, Latino/a workers, and African-American workers are disproportionately less likely to have paid sick time.<sup>1</sup> There is no federal right to paid sick time in the United States, and Congress only passed temporary, emergency protections that provided COVID-19 paid sick leave until December 31, 2020. Connecticut's current paid sick time law only addresses this need for paid sick time in a limited fashion, since the law only applies to certain hourly service workers who are working for employers with 50 or more employees; research from the U.S. Bureau of Labor Statistics show that workers at businesses with fewer than 50 employees are much less likely to receive any paid sick time than those who are employed by larger employers.<sup>2</sup> This narrow coverage makes the



**Headquarters**  
5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**  
2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**  
815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**  
303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

State an outlier among paid sick leave laws and renders Connecticut’s law barely protective of the workers who need it most. In fact, research from the National Partnership for Women & Families estimates that only 11% of employed workers in Connecticut are eligible for paid sick leave under the State’s current law.<sup>3</sup>

**As detailed later in this written testimony, numerous studies have shown that workers without paid sick time are less likely to seek medical care, more likely to face injuries at work, and more likely to go to work sick and spread illness to colleagues and community members.** Following a challenging winter with RSV, an active flu season, and continued COVID cases, Connecticut has the opportunity to take meaningful steps to modernize its paid sick time law and adopt a policy that reflects the dozens of other laws in effect around the U.S.

SB-1178 builds on best practices for paid sick leave that have been studied and implemented across the country in the past decade, such as providing comprehensive and universal coverage, a family definition that reflects the reality of families today, sufficient time off, and adequate enforcement. Numerous studies, highlighted in this testimony, clearly show that paid sick time laws in the United States have improved worker and public health, while also leading to cost savings and positive effects for businesses. **Rather than harming business, these laws have led to savings by successfully reducing worker turnover, boosting worker well-being and productivity, preventing the costly spread of illness, and leveling the playing field among businesses.**

Based on our work on paid leave laws around the country, the overwhelmingly positive outcome in the many jurisdictions that have passed workplace leave laws, and the urgent need for paid sick time among workers regardless of employer size or profession, we urge you to advance SB-1178 without delay.

## **II. SB-1178 Will Protect Connecticut Workers and Bring Connecticut into Line With Other States and Localities, While HB-6668 Would Perpetuate Numerous, Concerning Gaps in the Existing Law**

A Better Balance strongly supports SB-1178, which will better protect workers in Connecticut, improve public health, and benefit employers across the State. There are several core elements of SB-1178 that we would like to highlight in this section, especially given concerns with how those points are handled in the less comprehensive HB-6668. We are pleased that both bills would cover employees in Connecticut regardless of the economic sector in which they work, since no other paid sick time laws in the U.S. are limited to service workers or provide such broad industry exemptions. Nevertheless, SB-1178 is more comprehensive than HB-6668 on these six core points:

- 1) Eliminating any business size carve outs from the law, in general or from *paid* sick time; 2) using an inclusive family definition that mirrors Connecticut’s paid family and medical leave program; 3) eliminating the waiting period on use of accrued paid sick leave; 4) ensuring coverage of part-time workers, who accrue paid sick leave on an hours worked basis; 5) providing a private right of action, as in most state paid sick time laws; and 6) increasing the cap on accrued paid sick time to 80 hours.**

The remainder of this section discusses these six points in more detail:

- 1) SB-1178 provides paid sick time to workers regardless of business size, eliminating harmful exemptions.**
  - SB-1178 would change current law in Connecticut by eliminating a business size carve out for paid sick time. Connecticut’s current paid sick leave law for service workers exempts employers with fewer than 50

**Headquarters**

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

employees. Except for one very distinguishable example<sup>1</sup>, *no other state or local paid sick time law* contains a business size carve out for employers with fewer than 50 workers. The vast majority of laws have no business size carve out at all. Of the 35 paid sick time laws enacted, 32 have no business size carve out and the remaining law (other than Connecticut and Michigan) has a far smaller carve out.<sup>4</sup> SB-1178 would eliminate this significant exemption in Connecticut's current law, while HB-6668 takes a much more limited and concerning approach, as described in the next bullet.

- SB-1178 appropriately provides paid sick time to all covered workers, while HB-6668 excludes many employees from receiving pay while using paid sick time. The alternative paid sick time proposal, HB-6668, would still have a significant coverage gap, by only providing *paid* sick time to workers in businesses with 11 or more employees (rather than unpaid sick time). SB-1178 is consistent with the growing trend across the country in providing paid sick time to workers regardless of business size. Paid sick time laws in AZ, CA, CO, DC, NJ, NM, and WA (as well as many local laws, such as Chicago, San Francisco, Los Angeles, and Saint Paul, MN) provide *paid* sick time to workers regardless of business size; while a few of these laws vary the amount of paid sick time based on employer size, they do not exclude any covered employees from receiving pay while using their earned sick leave. Workers without access to paid sick time are less likely to be able to afford to use such time and more likely to go to work sick, thereby spreading illness in the workplace and the community. To ensure greater equity and the full public health benefits of paid sick leave, cities and states are increasingly providing paid sick time to all covered workers, and Connecticut should follow suit by adopting SB-1178.

**2) SB-1178 would modernize the paid sick leave law's family definition and mirror the State's existing paid family and medical leave program.**

- ABB strongly supports the modernization of the family definition in SB-1178, compared to the much narrower and outdated model proposed in HB-6668.
- Currently, Connecticut's sick time law defines family members for whom sick time may be taken as only minor children and spouses. All of the sick time laws in the U.S. recognize that family in America means more than that and define family much more broadly. Nearly every other paid sick time law in the United States defines family to include children (including adult children), parents and parents-in-law, grandparents, and grandchildren, and with only a couple of exceptions, nearly every paid sick time law includes siblings as well.<sup>5</sup> HB-6668's exclusion of grandparents and grandchildren would maintain Connecticut's paid sick time law as an extreme outlier on family coverage.
- Moreover, Connecticut's sick time law—and HB-6668—fails to recognize that some workers provide care to other loved ones—such as a significant other, a close loved one who is like a sister, or an aunt who helped to raise the worker. AZ, CO, NJ, NM, and RI have all adopted family definitions that recognize loved ones with whom the worker has a close relationship and/or caregiving responsibility, as has New York City, Los Angeles, Chicago and Cook County (IL), and Saint Paul and Duluth (MN); moreover, the federal government has used a similar version of this language for its own workforce for over 50 years.<sup>6</sup> Connecticut has already recognized the critical importance of these family relationships in the definition

---

<sup>1</sup> After a comprehensive Michigan paid sick time ballot initiative qualified for a statewide vote in the November 2018 election, the Michigan Legislature bypassed voters by passing the sick leave initiative policy themselves and then severely weakening the law in the lame duck session. The originally-passed law had universal coverage, while the amended law exempted all businesses with fewer than 50 employees—along with other exclusions—as a means to limit the law's reach and effectiveness. The legal maneuverings of the Legislature to avoid sending the initiative to voters is currently being litigated, with a recent appeal filed with the Michigan Supreme Court.

for the State’s paid family and medical leave insurance program; SB-1178 would adopt the same family definition for sick leave and bring Connecticut into line with other sick leave laws around the country.

**3) SB-1178 eliminates a harmful waiting period on use of accrued paid sick time.**

- SB-1178 appropriately removes the 680-hour waiting period in Connecticut’s current sick leave law, while we are concerned that HB-6668 maintains this problematic limitation.
- The current 680-hour waiting period—before workers can use paid sick leave—in Connecticut’s sick leave law makes the State an outlier. COVID-19 has underscored the fact that a waiting period on use of earned paid sick leave undermines the law’s public health purposes; workers can and do contract serious and contagious illnesses near the beginning of employment, as well as later in their tenure. The federal sick leave requirements enacted to combat COVID in 2020 allowed for immediate use and since then, new laws have also eliminated waiting periods. For example, the statewide laws in CO, NM, and NY all allow workers to use paid sick time immediately as it is earned. And many of the older laws allow use of accrued paid sick time much sooner than CT—after 90 calendar days of employment.
- It is important to recognize as well that paid sick time is an *accrued* benefit based on hours worked, which lessens the need for a waiting period. A full-time worker, for example, will not accrue a full paid sick day (8 hours) until they have worked 6 weeks; there is no reason to prevent a worker from accessing this modest amount of paid sick time as it is earned, especially if it can protect working individuals and the health of the larger community.

**4) SB-1178 covers part-time workers, an important feature of paid sick time laws; exemptions of part-time workers, which would disproportionately harm women and people of color, are unnecessary based on the structure of paid sick leave programs.**

- Connecticut’s current paid sick time law requires employees to work an average of 10 or more hours per week (in the most recently-completed calendar quarter) to use sick leave—an unnecessary and harmful exclusion that should be eliminated. While SB-1178 appropriately removes this part-time exclusion, we are concerned that HB-6668 maintains this problematic limitation.
- This requirement for coverage is completely unnecessary, due to how sick leave laws are structured, and makes Connecticut an extreme outlier. Because paid sick time is accrued based on hours worked at a rate of 1 hour of paid sick time earned for every 30 hours worked, a worker who works few hours will accrue paid sick time very slowly. In the event of illness or a medical emergency, an individual who works few hours needs sick time (in whatever amount earned) just as much as a worker who works more hours.
- Exclusion of part-time workers also makes a paid sick leave program inequitable. While 86% of full-time workers in the private-sector receive some amount of paid sick time, only 51% of part-time workers in the private sector have any paid sick leave.<sup>7</sup> The widespread lack of paid sick leave among part-time workers is especially harmful to women and people of color. Women are a majority—approximately 64 percent—of part-time workers.<sup>8</sup> People of color, and Black and Latino/a workers specifically, also represent a disproportionate percentage of workers that work part-time for economic reasons.<sup>9</sup>

**5) As in the vast majority of paid sick time laws, SB-1178 adds a private right of action to the paid sick time law, which supports the State’s enforcement work, provides a necessary backstop, and could help workers who face more significant violations.**

- ABB strongly supports the inclusion of a private right of action in SB-1178, and is concerned that no such mechanism is included in HB-6668. Nearly two-thirds of the paid sick time laws across the United

States—and the vast majority of statewide paid sick leave laws—include a private right of action, which allows workers to go to court to enforce their rights and seek remedies for violations (in addition to an administrative enforcement mechanism through the state government).

- A private right of action is a critical backstop to administrative enforcement for agencies struggling with a large case load or other internal agency issues that may limit staffing or resources. A private right of action ensures a continuous enforcement mechanism when agency resources fluctuate over time due to funding changes and shifts in agency leadership.
- Agencies often have limited negotiating power with employers, even if the employer violated the law. A private right of action can be a powerful motivator for employers to settle claims fairly with the state, in turn saving time and money for the agency. The existence of a private right of action also frees the agency to prioritize certain claims, given its knowledge that workers have other paths to vindicating their rights.
- Workers who face paid sick time violations often have other claims, including wage and hour claims. It is often easier to seek remedies for multiple types of violations at the same time in a single court action.
- Although paid sick time laws are written to give agencies broad authority to craft remedies, agencies have discretion in settling claims before them; monetary settlements are generally easier to achieve than equitable remedies—such as reinstatement when a job was lost due to taking protected sick time. Courts are more likely to order remedies that will make the worker whole, such as restoring the worker’s job and ordering injunctive relief to ensure an employer ceases illegal actions under the law. Because the amount of money involved in a paid sick time claim is often small, it is unlikely there will be much litigation in court if a private right of action is included; nevertheless, a private right of action is most likely to be utilized by those who were fired for using sick time—the workers who are most in need of protection.

**6) SB-1178 would increase the modest cap on paid sick time to 80 hours, providing an important safety net to workers (even though research shows workers on average do not use all of the days provided to them).**

- SB-1178 would expand the amount of sick leave workers can earn in a year under the law from the current ceiling of 40 hours to 80 hours, a modest increase that reflects the realities of COVID-19 and movement across the country to guarantee more paid sick time. We strongly support this proposal, as opposed to maintaining the current cap of 40 hours, as in HB-6668.
- As detailed later in this comment, research shows that workers do not on average take all of the time available to them; one study from the earliest paid sick time law showed that workers only used an average of 3 paid sick days a year, and 25% used none at all.<sup>10</sup> Another recent study by several academics showed that workers who are newly covered by a paid sick time policy use, on average, only about two additional paid sick days per year.<sup>11</sup> This research reflects how workers save their paid sick days for use when truly necessary. As the Legislature considers SB-1178, it is important to recognize these patterns in paid sick time usage, along with the clear public health benefits and cost savings for employers.
- Based on this research, states across the U.S. are increasingly guaranteeing more paid sick time to workers. For example, Colorado’s paid sick time law provides 48 hours of paid sick time to all workers, which is supplemented to 80 hours during a declared public health emergency. The country’s newest statewide paid sick time law in New Mexico guarantees all covered employees 64 hours of paid sick time.

**III. A Successful Track Record: Paid Sick Time Laws Benefit Workers, Employers, and Public Health**

In recent years, voters and policymakers have increasingly addressed the fact that large segments of the American workforce lack paid sick time. Based on research that underscores the success of paid sick time laws, sick leave

**Headquarters**

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

laws around the country are increasingly comprehensive, universal, and inclusive. After passing the country's first statewide program, Connecticut now has the opportunity to raise the law's protections to reflect current sick leave standards, research, and best practices around the country.

***I. Research clearly shows that comprehensive paid sick time laws have not caused problems for employers or the economy and, indeed, have a positive business effect.***

San Francisco's paid sick time law is the oldest in the U.S., passed by ballot in 2006, and its impacts have been well researched. Fifteen years of evidence shows there have been no adverse effects on San Francisco business and that job growth has been as substantial or better than in adjoining counties.<sup>12</sup> After the law's first anniversary, Kevin Westlye, Director of the Golden Gate Restaurant Association, told the *SF Chronicle* that, "[s]ick leave is one issue where people just looked at adjusting their policies and moved on. It hasn't been a big issue."<sup>13</sup>

Studies of New York City's paid sick time law showed steady job growth in the year after the law went into effect. On the law's first anniversary, the city released a report touting its successful implementation and noting that since the law went into effect, "the city has had steady job growth and the lowest unemployment in six years."<sup>14</sup> The city further reported that "New York City's economy has thrived since the enactment of PSL [paid sick leave]," and that in the period covering the law's implementation "economic indicators were a cause for celebration, not concern as many had predicted. . . ."<sup>15</sup>

A 2016 report surveying employers showed that New York City's paid sick time law has worked well for business. An overwhelming 98% of employers reported no known cases of abuse of paid sick leave.<sup>16</sup> One employer, Tony Juliano, has stated that before the city's paid sick leave law passed, "there were concerns that I and other small businesses had. But as it turns out, it hasn't had the kind of impact that I worried about. Not even close. And in fact, the impact that I saw in my business was a much stronger bond between ourselves and our employees, higher productivity, and a more successful business, not a less successful business."<sup>17</sup> Most employers were able to cover absences with cost-free measures, such as temporarily reassigning duties to other employees or putting some work on hold.<sup>18</sup> Given these results, employers in New York City have a positive view of the paid sick leave law; 86% of employers surveyed now described themselves as supportive of the law, with more than half saying they were "very supportive."<sup>19</sup>

Studies in D.C. and Seattle also saw no negative economic effects—in either job loss or movement of businesses out of the city—following implementation of their paid sick time laws. Five years after passage of the District's sick time law, the D.C. Auditor found that the law "did not have the economic impact of encouraging business owners to move a business from the District nor did the [law] have the economic impact of discouraging business owners to locate a business in the District of Columbia."<sup>20</sup> Likewise, a study of the economic impact of Seattle's sick leave law found that a "preliminary look at available data shows no widespread negative economic impact as some opponents of the ordinance feared."<sup>21</sup> In fact, King County, which includes Seattle, continued to outpace the state in job growth following implementation of the law. Seattle maintained its share of King County's businesses and revenues, with no evident business flight, including in the retail and food services sectors.<sup>22</sup>

There are also many ways in which providing paid sick time has proven to be *good* for businesses and for the economy. Indeed, significant benefits for business have been found in several studies of paid sick time, and these cost *savings* should be considered by the Connecticut Legislature as part of any deliberations.<sup>23</sup> Paid sick time has



#### Headquarters

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

#### Southern Office

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

#### DC Office

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

#### Colorado Office

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

been shown to reduce worker turnover, which leads to reduced business costs incurred from recruiting, interviewing, and training new hires.<sup>24</sup> Paid sick time also reduces the risk of “presenteeism”—workers coming to work with illnesses and health conditions that reduce their productivity—a problem that costs the national economy \$160 billion annually (\$207.6 billion after adjusting for inflation).<sup>25</sup> With greater paid sick time access among larger employers and for higher-wage positions,<sup>26</sup> SB-1178 will also help to level the playing field across all covered employers and employees and establish paid sick time as a basic workplace right.

As the Legislature considers SB-1178’s impact, it is important to recognize that workers on average do not use all of the paid sick days available to them. For example, when the federal government required contractors to provide 56 hours of paid sick time, the U.S. Department of Labor’s cost estimates accounted for the fact that average paid sick time usage is lower than the overall leave available:

“Although the [Federal Contractor] Executive Order will allow employees to accrue up to 56 hours of paid sick leave annually, many employees will not use all paid sick leave that they accrue (and many others will not work a sufficient number of hours on covered contracts to accrue 56 hours of paid sick leave in an accrual year). . . . Case studies demonstrate that not all paid sick days will be taken. In a comment by the Institute for Women's Policy Research, the organization cited the 2011 IWPR report on San Francisco's Paid Sick Leave Ordinance that found that the average worker used only three paid sick days per year and 25 percent used no paid sick days at all.”<sup>27</sup>

The cited paid sick time usage under San Francisco’s law—an average of three days—is especially notable given that San Francisco’s law allows workers in businesses with more than 10 employees to earn up to 72 hours of paid sick and safe time (with smaller employers receiving less paid sick time). Research on New York City’s paid sick time law has also found that workers are cautious in their use of sick time; as one employer stated, “[p]eople ration it. People want to save it up in case something serious happens.”<sup>28</sup> As discussed earlier in this comment, recent research from leading academics on sick time also showed that workers who are newly covered by a paid sick time policy use, on average, only about two additional paid sick days per year.<sup>29</sup> The Connecticut Legislature should, like the federal government, consider such usage data when estimating the effects of SB-1178, in addition to public health benefits and the *savings* that businesses see when they provide the benefit.

Even when average usage of paid sick time is lower than what may be available, a higher threshold of available paid sick time is still necessary. In a given year, many workers may ration their leave and not face as strong a need for time off, while they may face an unexpected emergency the following year; each year, some workers will face health or safety needs that necessitate the full amount of time. The availability of up to 80 hours of paid sick time to workers across Connecticut establishes an adequate safety net for covered workers—even if average usage will be lower each year.

Recognizing these benefits and the lack of negative business consequences, San Francisco, D.C., and New York City—all among the earliest adopters of paid sick time laws—later went back and *expanded* their paid sick leave laws, underscoring how well these laws are working for workers, employers, and communities. New York City’s paid sick leave law has been so successful that the City Council has *three times* expanded it to include broader coverage—most recently to allow workers to use paid sick leave immediately as it is earned, ensure that domestic workers receive *paid* sick time, and to increase the annual paid sick time cap for workers with large employers.<sup>30</sup> Connecticut should follow the example of these early paid sick time adopters and modernize the State’s law.

## ***II. SB-1178 will improve the public health and well-being of all Connecticut residents.***

In addition to the positive effect on business, paid sick time laws improve both employee health and the larger public health of the community. It is especially relevant right now that access to paid sick time reduces the spread of contagion. Workers in jobs with high public contact, such as restaurant and child care workers, are very unlikely to have paid sick time.<sup>31</sup> As a result, these workers may have no choice but to go to work when they are ill, increasing the risk of passing illnesses to co-workers and customers while also jeopardizing their own health.<sup>32</sup> A peer-reviewed epidemiological study found that nearly one in five food service workers had come to work vomiting or with diarrhea in the past year, creating dangerous health conditions.<sup>33</sup> The largest national survey of U.S. restaurant workers found that two-thirds of restaurant waitstaff and cooks have come to work sick.<sup>34</sup>

Overall, people without paid sick time are 1.5 times more likely than people with paid sick time to go to work with a contagious illness like the flu, a fact that is costly and disruptive on an annual basis and catastrophic during a pandemic.<sup>35</sup> During the H1N1 pandemic a decade ago, research showed that workers with lower rates of access to paid sick time were more likely than those with higher rates of access to paid sick time to go to work sick, and as a result, the pandemic lasted longer in their workplaces as the virus spread among co-workers and throughout the community.<sup>36</sup> Researchers have already demonstrated that access to paid sick leave similarly reduces COVID transmission and cases.<sup>37</sup> One study found that temporary access to paid sick leave led to a decrease in 400 COVID cases per day per state without existing paid sick leave requirements during the height of the pandemic.<sup>38</sup> Even during a regular flu season, let alone a pandemic, government officials strongly advise that sick workers stay home to prevent the spread of illness.<sup>39</sup> However, because many workers lack paid sick time, they may be unable to comply, risking transmission to colleagues and the larger public. In addition, parents who do not have paid sick time are more than twice as likely to send a sick child to school or daycare, which spreads illness.<sup>40</sup>

Around the country, paid sick time has been shown to reduce recovery time, increase primary and preventive care, and lower health care expenditures by promoting the use of regular medical providers rather than hospital emergency rooms.<sup>41</sup> Nationally, providing all workers with paid sick time would result in \$1.1 billion in annual savings in hospital emergency department costs, including more than \$500 million in savings to publicly funded health insurance programs such as Medicare, Medicaid, and SCHIP.<sup>42</sup> It is more critical than ever to reduce the burden on our already-strained healthcare system and avoid unnecessary strain on hospital emergency rooms, while also ensuring workers are able to get vaccinated and obtain boosters—and take time off for side effects—for themselves and loved ones. A study by Centers for Disease Control and Prevention researchers also found that workers who have access to paid sick time are significantly more likely to undergo routine cancer screenings—including mammograms, Pap tests, and colonoscopies—and to visit a doctor or obtain other medical care.<sup>43</sup>

Paid sick time has also been shown to prevent employee accidents, which in turn helps to prevent disruptions for employers and ensures safer and more efficient work. A study by researchers from the National Institute for Occupational Safety and Health at the Centers for Disease Control and Prevention found that workers with access to paid sick time were 28% less likely than workers without access to paid sick time to be injured on the job.<sup>44</sup> The strongest connection between access to paid sick time and a lower incidence of occupational injuries occurs in high-risk sectors and occupations.<sup>45</sup>

SB-1178 would also extend the current law's time off for victims of sexual and domestic violence to workers across professions and regardless of business size. More than one in four American women report having

**Headquarters**

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

experienced a negative impact from sexual violence, physical violence, and/or stalking by an intimate partner at some point in their lives.<sup>46</sup> Many workers need time away from their jobs to care for their health after these incidents or to find solutions, such as a restraining order or new housing, to avoid or prevent physical or sexual abuse. Each year, victims of domestic violence are forced to miss nearly eight million days of paid work, costing more than \$700 million annually due to victims' lost productivity in employment.<sup>47</sup> Furthermore, many survivors report job loss, due at least in part to the domestic violence.<sup>48</sup> Loss of employment can be particularly devastating for survivors of domestic violence, who often need economic security to ensure their and their children's safety.

#### ***IV. Based on an Understanding of the Clear Need and Benefits, Voters Across Party Lines Support Paid Sick Time as a Basic Labor Standard***

Residents of Connecticut also recognize the need for basic, universal paid sick time provisions. Regardless of political party, large majorities of voters in the United States recognize the need for paid sick time and support paid leave laws. In one recent poll, 87% of voters said they supported paid sick days and paid family leave for all workers impacted by the COVID-19 pandemic, including 91% of Democrats, 86% of Republicans and 71% of Independents.<sup>49</sup> Across party lines, voters also overwhelmingly say they are more likely to support elected officials who support general paid sick days legislation.<sup>50</sup> Numerous polls show similarly high public support for paid sick leave requirements.<sup>51</sup>

#### **Conclusion**

SB-1178 provides an important opportunity for Connecticut to modernize its first-in-the-country statewide sick time law and better reflect best practices and research on paid sick time. Comprehensive, inclusive paid sick leave laws come with a track record of success and lead to benefits and savings for business, as demonstrated by research and the experience of other jurisdictions. This winter—with the spread of RSV, flu, and COVID-19 all at the same time—has continued to put a spotlight on the critical need and public health implications of paid sick time, both during and beyond public health crises. Paid sick time laws improve worker health and safety, reduce the spread of illnesses, and improve public health throughout the larger community.

For the reasons outlined in this testimony, we urge members of the Labor and Public Employees Committee to support and advance SB-1178, especially in regards to the six core policy points outlined in the second section of this document. Thank you again for your consideration and the opportunity to submit this comment.

---

<sup>1</sup> See “Employee Benefits In The United States – March 2022,” U.S. Dep’t of Labor, Bureau of Labor Statistics (2022), Table 6, <https://www.bls.gov/news.release/pdf/ebs2.pdf>; “Latinos and Their Families Need Paid Sick Days,” National Partnership for Women & Families (January 2017), available at <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/latino-workers-need-paid-sick-days.pdf>; “African Americans and Their Families Need Paid Sick Days,” National Partnership for Women & Families (January 2017), <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/african-american-workers-need-paid-sick-days.pdf>.

<sup>2</sup> See “Employee Benefits In The United States – March 2022,” *supra* note 1, at Table 6. (showing that 30% of civilian workers whose employers employ 1 to 49 workers lack paid sick leave, compared to only 21% in the 50-99 workers category, 16% in the 100-499 workers, and 9% in the 500 or more workers category).

<sup>3</sup> “Connecticut Workers Need a Stronger Paid Sick Leave Law,” National Partnership for Women & Families (November 2022), available at <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/connecticut-stronger-paid-sick-leave.pdf>.

<sup>4</sup> See “Interactive Overview of Paid Sick Time Laws in the United States,” A Better Balance, <https://www.abetterbalance.org/paid-sick-time-laws/> (last visited March 7, 2023).

<sup>5</sup> *Id.*

**Headquarters**

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

<sup>6</sup>*Id.* See also Funeral Leave, Fed. Reg., Vol. 34, No. 163 (August 26, 1969) (codified at 5 C.F.R. pt. 630); Absence and Leave; Voluntary Leave Transfer Program, 54 Fed. Reg. 4749-01 (January 31, 1989) (codified at 5 C.F.R. pt. 630); Absence and Leave; Sick Leave, 59 Fed. Reg. 62266-01 (December 2, 1994) (codified at 5 C.F.R. pt. 630).

<sup>7</sup> See “Employee Benefits In The United States – March 2022,” *supra* note 1, at Table 6.

<sup>8</sup> “Full-Time/Part-Time Employment,” U.S. Dep’t of Labor, <https://www.dol.gov/agencies/wb/data/latest-annual-data/full-and-part-time-employment> (last accessed March 7, 2023).

<sup>9</sup> See Lonnie Golden, “Part-Time Workers Pay A Big-Time Penalty” at Table 3 (Feb. 27, 2020), <https://files.epi.org/pdf/179038.pdf> (note that while the cited report uses the term “Hispanic,” this document refers to the same demographic using the term “Latino/a”).

<sup>10</sup> See “Establishing Paid Sick Leave for Federal Contractors,” 81 FR 67598, Vol. 81, No. 190 (September 30, 2016), p. 67671, <https://www.govinfo.gov/content/pkg/FR-2016-09-30/pdf/2016-22964.pdf> (finding that “Case studies demonstrate that not all paid sick days will be taken. In a comment by the Institute for Women’s Policy Research, the organization cited the 2011 IWPR report on San Francisco’s Paid Sick Leave Ordinance that found that the average worker used only three paid sick days per year and 25 percent used no paid sick days at all”).

<sup>11</sup> Catherine Maclean, et al. “Mandated Sick Pay: Coverage, Utilization, and Welfare Effects,” Washington Center for Equitable Growth (January 2022), <https://equitablegrowth.org/working-papers/mandated-sick-pay-coverage-utilization-and-welfare-effects/>.

<sup>12</sup> Kevin Miller and Sarah Towne, “San Francisco Employment Growth Remains Stronger with Paid Sick Days Law Than Surrounding Counties,” Institute for Women’s Policy Research (September 2011), p. 1, <http://www.iwpr.org/publications/pubs/san-francisco-employment-growth-remains-stronger-with-paid-sick-days-law-than-surrounding-counties>.

<sup>13</sup> Ilana DeBare, “S.F. Sick Leave Law Celebrates 1 Year,” SFGATE (February 6, 2008), <https://www.sfgate.com/business/article/S-F-sick-leave-law-celebrates-1-year-3229376.php>.

<sup>14</sup> “NYC’s Paid Sick Leave Law: First Year Milestones,” New York City Department of Consumer Affairs (June 2015), p. 4, <http://www1.nyc.gov/assets/dca/downloads/pdf/about/PaidSickLeaveLaw-FirstYearMilestones.pdf>.

<sup>15</sup> *Id.*, p. 6.

<sup>16</sup> Eileen Appelbaum and Ruth Milkman, “No Big Deal: The Impact of New York City’s Paid Sick Days Law on Employers,” Center for Economic and Policy Research and the Murphy Institute of the City University of New York (September 2016), p. 4, <http://cepr.net/images/stories/reports/nyc-paid-sick-days-2016-09.pdf>.

<sup>17</sup> Zoe Ziliak Michel, “During Healthy Families Act Days of Action, Business Owners Stress Benefits of Paid Sick Time,” Center for Law and Social Policy (CLASP) (May 16, 2016), <https://www.clasp.org/blog/during-healthy-families-act-days-action-business-owners-stress-benefits-paid-sick-time>.

<sup>18</sup> Appelbaum and Milkman, “No Big Deal,” *supra* note 16, at p. 19.

<sup>19</sup> *Id.*, p. 28.

<sup>20</sup> Yolanda Branche, “Audit of the Accrued Sick and Safe Leave Act of 2008,” Office of the District of Columbia Auditor (June 2013), p. 19, <http://dcauditor.org/report/audit-of-the-accrued-sick-and-safe-leave-act-of-2008/>.

<sup>21</sup> Main Street Alliance of Washington, “Paid Sick Days and the Seattle Economy: Job Growth and Business Formation at the 1-Year Anniversary of Seattle’s Paid Sick and Safe Leave Law” (September 2013), p. 4, <http://www.eoionline.org/wp/wp-content/uploads/PSD-1-Year-Report-Final.pdf>.

<sup>22</sup> *Id.*

<sup>23</sup> See, e.g., CLASP, “The Business Benefits of Paid Sick Time (January 2016), <http://www.clasp.org/resources-and-publications/publication-1/Business-Case-for-HFA-3.pdf>.

<sup>24</sup> Christine Siegwath Meyer, Swati Mukerjee & Ann Sestero, “Work-Family Benefits: Which Ones Maximize Profits?” *Journal of Managerial Issues*, 13(1), pp. 28-44.

<sup>25</sup> Walter F. Stewart, et al., “Lost Productive Work Time Costs from Health Conditions in the United States: Results from the American Productivity Audit.” *Journal of Occupational and Environmental Medicine*, 45(12) (December 2003), <http://www.nationalpartnership.org/research-library/work-family/psd/lost-productive-work-time-american-productivity-audit.pdf> (Unpublished calculation based on \$226 billion annually in lost productivity, 71 percent due to presenteeism).

<sup>26</sup> “Employee Benefits In The United States – March 2022,” *supra* note 1, at Table 6.

<sup>27</sup> “Establishing Paid Sick Leave for Federal Contractors,” 81 Fed. Reg. 67,598, 67,690 (Sept. 30, 2016).

<sup>28</sup> Appelbaum and Milkman, “No Big Deal,” *supra* note 16, at p. 16.

<sup>29</sup> Catherine Maclean, et al. “Mandated Sick Pay: Coverage, Utilization, and Welfare Effects,” Washington Center for Equitable Growth (January 2022), <https://equitablegrowth.org/working-papers/mandated-sick-pay-coverage-utilization-and-welfare-effects/>.

<sup>30</sup> “NYC Paid Sick Time Law: How Recent Updates Will Help Workers,” A Better Balance (Oct. 7, 2020), <https://www.abetterbalance.org/nyc-paid-sick-time-law-how-recent-updates-will-help-workers/>.

<sup>31</sup> Rachel O’Connor, Jeff Hayes & Barbara Gault, “Paid Sick Days Access Varies by Race/Ethnicity, Sexual Orientation, and Job Characteristics,” Institute for Women’s Policy Research (July 2014), <https://iwpr.org/publications/paid-sick-days-access-varies-by-raceethnicity-sexual-orientation-and-job-characteristics/>.

<sup>32</sup> Won Kim Cook, et al. “A Health Impact Assessment of the Healthy Families Act of 2009,” Human Impact Partners (September 2009), [http://go.nationalpartnership.org/site/DocServer/WF\\_PSD\\_HFA\\_HealthImpactAssessment\\_HIA\\_090611.pdf?docID=5101](http://go.nationalpartnership.org/site/DocServer/WF_PSD_HFA_HealthImpactAssessment_HIA_090611.pdf?docID=5101) (last visited February 4, 2020).

<sup>33</sup> Steven Sumner, et al. “Factors Associated with Food Workers Working while Experiencing Vomiting or Diarrhea,” *Journal of Food Protection* 74(2) (2011), [http://www.cdc.gov/nceh/ehs/ehsnet/Docs/JFP\\_ill\\_food\\_workers.pdf](http://www.cdc.gov/nceh/ehs/ehsnet/Docs/JFP_ill_food_workers.pdf)

<sup>34</sup> “Serving While Sick: High Risks & Low Benefits for the Nation’s Restaurant Workforce, and Their Impact on the Consumer,” Restaurant Opportunities Centers United (September 2010), [http://rocutined.org/wp-content/uploads/2013/04/reports\\_serving-while-sick\\_full.pdf](http://rocutined.org/wp-content/uploads/2013/04/reports_serving-while-sick_full.pdf).

<sup>35</sup> Tom W. Smith and Jibum Kim, “Paid Sick Days: Attitudes and Experiences,” National Opinion Research Center at the University of Chicago Publication (June 2010), <https://www.nationalpartnership.org/our-work/resources/economic-justice/paid-sick-days/paid-sick-days-attitudes-and-experiences.pdf>.

<sup>36</sup> Robert Drago and Kevin Miller, “Sick at Work: Infected Employees in the Workplace During the H1N1 Pandemic,” Institute for Women’s Policy Research (January 2010), <http://www.iwpr.org/publications/pubs/sick-at-work-infected-employees-in-the-workplace-during-the-h1n1-pandemic>.

**Headquarters**

5 Columbus Circle, 11<sup>th</sup> floor  
New York, NY 10019  
tel: 212.430.5982

**Southern Office**

2301 21<sup>st</sup> Ave. South, Suite 355  
Nashville, TN 37212  
tel: 615.915.2417

**DC Office**

815 16<sup>th</sup> Street NW, Suite 4162  
Washington, DC 20005

**Colorado Office**

303 E. 17<sup>th</sup> Ave., Suite 400  
Denver, CO 80203

[abetterbalance.org](http://abetterbalance.org) | [info@abetterbalance.org](mailto:info@abetterbalance.org)

- 
- <sup>37</sup> See Stefan Pichler et al., “COVID-19 Emergency Sick Leave Has Helped Flatten The Curve in The United States,” *Health Affairs* (October 2020), <https://www.healthaffairs.org/doi/10.1377/hlthaff.2020.00863> (finding that states that gained access to paid sick leave under the temporary and now sunset Families First Coronavirus Response Act reported 400 fewer COVID-19 cases per state per day).
- <sup>38</sup> See Dilini Lankachandra et al., *Sick Without a Safety Net: Now Is the Time to Build on State Successes with a Federal Paid Sick Time Law*, A Better Balance (March 2022), <https://www.abetterbalance.org/sick-without-a-safety-net/>.
- <sup>39</sup> See U.S. Occupational Safety and Health Administration, “OSHA Fact Sheet: What Employers Can Do to Protect Workers from Pandemic Influenza,” (May 2009), <http://www.osha.gov/Publications/employers-protect-workers-flu-factsheet.html> (last visited February 4, 2020); “What do I do if I’m sick?” Florida Department of Health (May 5, 2020), <https://floridahealthcovid19.gov/treatment/>.
- <sup>40</sup> Smith and Kim, “Paid Sick Days: Attitudes and Experiences,” *supra* note 35, at p. 6.
- <sup>41</sup> Vicky Lovell, “Paid Sick Days Improve Public Health by Reducing the Spread of Disease,” Institute for Women’s Policy Research (January 2006), <http://www.iwpr.org/publications/pubs/paid-sick-days-improve-public-health-by-reducing-the-spread-of-disease>.
- <sup>42</sup> Kevin Miller, Claudia Williams & Youngmin Yi, “Paid Sick Days and Health: Cost Savings from Reduced Emergency Department Visits,” Institute for Women’s Policy Research. (November 2011), pp. iii, 14-15, <http://www.iwpr.org/publications/pubs/paid-sick-days-and-health-cost-savings-from-reduced-emergency-department-visits>.
- <sup>43</sup> Lucy A. Peipins, et al., “The lack of paid sick leave as a barrier to cancer screening and medical care-seeking: results from the National Health Interview Survey.” *BMC Public Health* (12)520 (2012), <http://www.biomedcentral.com/content/pdf/1471-2458-12-520.pdf>.
- <sup>44</sup> Abay Asfaw, Regina Pana-Cryan & Roger Rosa, “Paid Sick Leave and Nonfatal Occupational Injuries,” *American Journal of Public Health*, 102(9) (September 2012), <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2011.300482>.
- <sup>45</sup> *Id.*
- <sup>46</sup> Matthew J. Breiding, et al. “Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization – National Intimate Partner and Sexual Violence Survey, United States, 2011,” *Morbidity and Mortality Weekly Report*, Centers for Disease Control and Prevention 63(SS08) (September 5, 2014), <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6308a1.htm>.
- <sup>47</sup> “Intimate Partner Violence: Consequences,” Centers for Disease Control and Prevention (December 2013), <http://www.cdc.gov/ViolencePrevention/intimatepartnerviolence/consequences.html> (last visited September 21, 2015); R.F. Hanson, et al., “The Impact of Crime Victimization on Quality of Life,” *Journal of Traumatic Stress*, 23(2) (April 2010), pp. 189–197, <https://www.ncbi.nlm.nih.gov/pubmed/20419728>.
- <sup>48</sup> Susan Lloyd and Nina Taluc, “The Effects of Male Violence on Female Employment,” *Violence Against Women*, 5(4) (April 1, 1999), pp. 370-92, <http://vaw.sagepub.com/content/5/4/370.short?rss=1&ssource=mfc>.
- <sup>49</sup> Vicki Shabo, “High Levels of Bipartisan Public Support for National Emergency Paid Sick Days and Paid Family and Medical Leave in the Wake of COVID-19,” New America, April 10, 2020 Memo, p. 5.
- <sup>50</sup> *Id.*, p. 4.
- <sup>51</sup> *Id.*